

# PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
(703) 746-4000**

or **Fax**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

21874 7590 05/12/2004

EDWARDS & ANGELL, LLP  
P.O. BOX 55874  
BOSTON, MA 02205



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

<b>Michelle P. Chicos</b>	(Depositor's name)
<i>Michelle P. Chicos</i>	(Signature)
<b>July 28, 2004</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/047,835	01/14/2002	Sien-Chun Chou	56868 (71987)	5690

TITLE OF INVENTION: METHOD FOR RECOVERING AND PRODUCING C4-C6 DICARBOXYLATE FROM ALKALINE WASTE SOLUTION GENERATED IN CAPROLACTAM PREPARATION PROCESS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/12/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
OH, TAYLOR V	1625	562-524000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rcv 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- Peter F. Corless**
- John B. Alexander, Ph.D.**
- Edwards & Angell, LLP**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**Chemax International Corporation**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Taiwan, R.O.C.**

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee  
☒ Advance Order - # of Copies **3**

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number **04-1105** (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) *[Signature]* (Date) **7/28/2004**

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

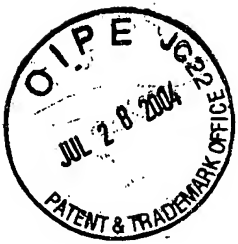
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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08/02/2004 GWORDF2 00000127 10047835

01 FC:1501 1330.00 OP  
02 FC:1504 300.00 OP  
03 FC:8001 9.00 OP

TRANSMIT THIS FORM WITH FEE(S)



Practitioner's Docket No. 56868 (71987)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: S.-C. Chou  
U.S.S.N.: 10/047,835  
FILED: January 14, 2002  
FOR: METHOD FOR RECOVERING AND PRODUCING C<sub>4</sub>-C<sub>6</sub>  
DICARBOXYLATE FROM ALKALINE WASTE SOLUTION GENERATED  
IN CAPROLACTAM PREPARATION PROCESS

Mail Stop Issue Fee  
Commissioner for Patents  
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TRANSMITTAL OF PAYMENT OF ISSUE FEE  
(37 C.F.R. SECTION 1.10)

CERTIFICATION UNDER 37 C.F.R. 1.10\*

(Express Mail label number is **mandatory**.)

(Express Mail certification is **optional**.)

I, the undersigned, do hereby certify that I have on the date set below, deposited this document and all related documents with the United States Postal Service, in an envelope as "Express Mail Post Office to Addressee," mailing Label Number **EV438971519US** addressed to the Commissioner for Patents, U.S. Patent & Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: July 28, 2004

By: \_\_\_\_\_

*Michelle P. Chicos*  
Michelle P. Chicos

1. Applicant hereby pays the issue fee for the attached Issue Fee Transmittal PTOL - 85.
2. Fee (37 C.F.R. section 1.18(a) and (b)):

Application status is: **Regular**

- |                                     |                               |                                     |            |
|-------------------------------------|-------------------------------|-------------------------------------|------------|
| <input type="checkbox"/>            | small business entity fee     | <input type="checkbox"/>            | \$ 665.00  |
| <input type="checkbox"/>            | statement attached            |                                     |            |
| <input type="checkbox"/>            | statement filed on _____      |                                     |            |
| <input checked="" type="checkbox"/> | other than a small entity fee | <input checked="" type="checkbox"/> | \$1,330.00 |

- |  |                                     |           |
|--|-------------------------------------|-----------|
| 3. Publication fee                             | <input checked="" type="checkbox"/> | \$ 300.00 |
| 4. Advanced order of soft copies of patent fee | <input checked="" type="checkbox"/> | \$ 9.00   |

**Fees Enclosed: \$1,639.00**



## PAYMENT OF FEES

☒ Enclosed please find a check for \$1,639.00.

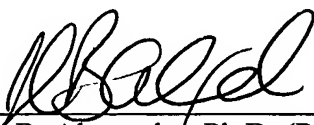
☒ Charge Account 04-1105 for any fee deficiency.

☐ Charge Account \_\_\_\_\_ the sum of \$ \_\_\_\_\_.

A duplicate of this request is attached.

Respectfully submitted,

Date: July 28, 2004

  
\_\_\_\_\_  
John B. Alexander, Ph.D. (Reg. No. 48,399)  
EDWARDS & ANGELL, LLP  
P.O. Box 55874  
Boston, MA 02205

Tel. No. (617) 439-4444

Fax. No. (617) 439-4170

Customer No. 21874